

MULTIPLE DEPENDENT  
FEE CALCULATION  
(FOR USE WITH FORM 7)

	AS FILED		AFTER 1st AMENDMENT	
	IND.	DEP.	IND.	DEP.
1				
2		1		
3				
4				
5				
6				
7				
8		1		
9				
10		1		
11				
12		1		
13				
14		1		
15				
16		1		
17				
18		1		
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48				
49				
50				
TOTAL IND.	2		↓	
TOTAL DEP.	19	↓		↓
TOTAL CLADS	21	↓	↓	↓

CLAIM EET 575)	CLAIM NO. 101865353	FILING DATE				
CLAIMS						
TER ENDMENT	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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96						
97						
98						
99						
100						
TOTAL IND.			↓			↓
TOTAL DEP.			↓			↓
TOTAL CLADS			↓			↓